

# Benjamin Banneker Academic High School

800 Euclid Street, N.W.  
Washington, D. C. 20001  
(202) 671-6320 Fax (202) 673-2231  
<http://BenjaminBanneker.k12.dc.us>

## Application

School Year 2011-2012

**Due Date: January 28, 2011**

### SELECTION PROCESS

Consideration for acceptance by the Selection Committee will be based upon:

- Verified residency in the District of Columbia
- Academic achievement (Rank in top 18% of grade level)
- Standardized test scores above grade level in reading and mathematics
- Student Assessments/Recommendations by current school personnel
- The student's expository statements
- Personal interview
- Submission of Final Report Card



### Open House

Saturday, November 6, 2010  
9:00 a.m. - 12:00 Noon

- Selection Committee Reviews – February 3, 2011
- Initial Admission Interview – February 16, 2011
- Second Admission Interview – March 16, 2011

**Please note: A copy of the second advisory grades must be submitted to Banneker after receipt of an interview letter.  
It is imperative that you bring grades with you.**

## THE APPLICATION

Students who wish to apply for admission should obtain an application packet from the guidance counselors in their current school. New entries to the D. C. Public Schools may secure an application at Benjamin Banneker Academic High School.

The entire screening and selection process of applicants for the Benjamin Banneker Academic High School is the responsibility of a Selection Committee. Determination of accepted applicants will be made after submission of a complete application and a personal interview. Notification of approval or denial will be in writing. Acceptance is also contingent upon Banneker's receipt of the applicants' 4<sup>th</sup> advisory report card and most recent test scores. All accepted students are expected to attend the Banneker Summer Institute, a five-week program.

### COMPLETING THE APPLICATION PACKET

Your complete application packet must contain the following forms:

Form BB-1:	Student Application/Student Statement
Form BB-2:	Parental Permission and Agreement; Residency Requirements
Form BB-3:	Student Assessment - English Teacher
Form BB-4:	Student Assessment - Mathematics Teacher
Form BB-5:	Student Assessment - Other Teacher
Form BB-6:	Student Assessment - Counselor
Form BB-7:	Community Service/Civic Recommendation
Form BB-8:	Class Rank Verification – Principal's Recommendation
Form BB-9:	Course Verification

All forms must be completed and returned in order to receive consideration for admission. It is the responsibility of the applicant to return a complete application. Incomplete applications will not be reviewed.

### THE STUDENT AND HIS OR HER PARENT WILL:

- Read all directions.
- Print applicant's name on all forms.
- Complete Form BB-1 and Form BB-2 and return them to the counselor.
- Distribute Form BB-7 to the appropriate person for completion.
- Give all remaining forms (BB-3 through 9)

to the counselor for distribution/completion.

- Check with school counselor periodically to see that all additional forms have been completed by the due date.

### THE COUNSELOR WILL:

- Distribute all forms except those for which the student and parent are responsible.
- Complete the Counselor's page, Form BB-6.
- Attach the data requested at the bottom of Form BB-6.
- Collect completed Forms BB-3 through Form BB-9.
- Submit the total packet to Admissions Office, Benjamin Banneker Academic High School, 800 Euclid Street, N.W., Washington, D. C. 20001. FAXED FORMS WILL NOT BE ACCEPTED.

After your forms have been received at Banneker:

- Applications are reviewed, evaluated and scored by a screening committee.
- Acceptable applicants are assigned to an interview panel.
- Successful applicants are notified of placement testing date.

### SELECTION PROCESS

Consideration for acceptance by the Selection Committee will be based upon:

- Verified residency in the District of Columbia.
- Academic achievement (Rank in top 18% of grade level).
- Standardized test scores above grade level in reading and mathematics.
- Student Assessments/Recommendations by current school personnel.
- The student's expository statements.
- Personal interview.
- Review of final report card & test scores.
- Banneker reserves the right to rescind acceptance after review of the applicant's final school record for the current school year.

FORM BB-1

**Benjamin Banneker Academic High School**

**STUDENT APPLICATION**

***Personal Data***

Name of Applicant \_\_\_\_\_  
Last First Middle  
Home Address \_\_\_\_\_  
Number Street Apt. No.  
\_\_\_\_\_  
State Zip Code Telephone Number  
\_\_\_\_\_  
Date of Birth Country of Birth (Optional) Ethnicity (Optional)

Political Ward \_\_\_\_\_

DCPS Number \_\_\_\_\_ Sex M [ ] F [ ]

Name of Current School \_\_\_\_\_ Current Grade \_\_\_\_\_

Principal of Current School \_\_\_\_\_

**Does applicant have any problems that will affect his/her participation in the program?**

**Yes [ ] No [ ] (If yes, explain):** \_\_\_\_\_

***Family Data***

Name of Parents:

Father \_\_\_\_\_ [ ] Living [ ] Deceased  
First Last

Mother \_\_\_\_\_ [ ] Living [ ] Deceased  
First Last

Legal Guardian \_\_\_\_\_ Relationship \_\_\_\_\_

Applicant lives with: Both parents [ ] Mother [ ] Father [ ] Guardian [ ]

Siblings: No. of Brothers \_\_\_\_\_ No. of Sisters \_\_\_\_\_

Work Phone:	Cell Phone:
<b>Father</b> _____	_____
	Email _____
<b>Mother</b> _____	_____
	Email _____
<b>Guardian</b> _____	_____
	Email _____

***Emergency Contact:***

Name \_\_\_\_\_ Telephone No. \_\_\_\_\_

**Parent's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

FORM BB-1

**Benjamin Banneker Academic High School**

**STUDENT STATEMENT**

Name of Applicant \_\_\_\_\_  
Last First Middle  
(Please Print)

Briefly answer the questions below as thoughtfully and neatly as possible in paragraph form.  
Your answer should be in **your own handwriting and in ink**. Do not type.

1. Discuss why you wish to attend Benjamin Banneker Academic High School.

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2. Indicate the extracurricular activities, hobbies, sports, or other interests that are most important to you and state why in paragraph form.

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Return Completed Form to Counselor

Form BB-2

**Benjamin Banneker Academic High School**

Memorandum

To: Parents and Guardians

Subject: Things to Consider

If you are considering having your child complete an application for admission to Benjamin Banneker Academic High School, you should give a great deal of thought to the answers to the following questions:

**Initial**

- \_\_\_\_\_ ● Does my child rank in the top 18% of his/her grade level?
- \_\_\_\_\_ ● Based on his/her academic and social records, will my child's current teachers and principal recommend him/her to enroll in Banneker?
- \_\_\_\_\_ ● Is my child an avid reader and problem solver?
- \_\_\_\_\_ ● Is he/she willing to spend at least three hours every day preparing independent research and home assignments?
- \_\_\_\_\_ ● Will my child be willing to perform community service every week over the next four years? (270 hours required)
- \_\_\_\_\_ ● Is my child willing to adhere to the Banneker grading scale? (95-100 A, 88-94 B, 77-87 C, 70-76 D)
- \_\_\_\_\_ ● Does my child have a hobby that expands his/her mind and horizons?
- \_\_\_\_\_ ● Has my child participated in extracurricular activities beyond the regular school day?
- \_\_\_\_\_ ● Does my child continue to push forward even when the going is difficult?
- \_\_\_\_\_ ● Is my child willing to accept a "0" tolerance cell phone policy?
- \_\_\_\_\_ ● Does my child plan to go to college?
- \_\_\_\_\_ ● Am I willing to give the necessary time and energy to help my child be successful at Banneker?
- \_\_\_\_\_ ● Is my child aware of and willing to obey Banneker's honor code policy, dress code policy and attendance policy?

If the answer is "Yes" to most of the above questions, the student probably meets the criteria for success in the Banneker program.

Form BB-2

**Benjamin Banneker Academic High School  
Parental Agreement**

I/We hereby give permission for \_\_\_\_\_  
to attend, if accepted, the Benjamin Banneker Academic High School of the  
District of Columbia.

We understand and agree with the concept of the school and will support efforts to  
fulfill:

- The prescribed course of study
- Longer school days (as necessary)
- The required community service hours
- Mobility as required by the program.
- Compliance to the dress code policy
- Regulation of the Honor Code policy
- Acceptance of the zero tolerance cell phone policy
- Attendance policy expectations

_____ Date	_____ Signature of Parent/Guardian
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**Release of School Records**

I/We hereby give consent for the release of school records, test scores and evaluations to:

Benjamin Banneker Academic High School  
800 Euclid Street, N.W.  
Washington, D. C. 20001

_____ Signature of Student	_____ Signature of Parent/Guardian
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**Residency Requirement**

**Applicants must reside in the District of Columbia with a parent or legal guardian.**

**Part A**

My signature certifies that I am the legal parent or guardian of the applicant and that the  
address stated is also that of my child. **A guardian must present court papers.**

_____ Signature	// Parent // Guardian	_____ Relationship to Applicant
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Return Completed Form to Counselor

Form BB-2

Part B – Residency Requirements

Name of Applicant \_\_\_\_\_  
Last First Middle

**REQUIRED PROOFS OF DISTRICT RESIDENCY:**

As described more fully below, to verify their District residency, parents and guardians will be required to submit documents.

**(A) One (1) of the following items suffices to establish DC residency.**

- **A pay stub**, with an issue date within the past forty-five (45) days, that contains the name of the person enrolling the student, shows his/her current DC home address, and withholding of DC income tax for the current tax year; or
- **Official documentation of financial assistance from the Government of the District of Columbia** and issued to the person enrolling the student within the past twelve (12) months, including, but not limited to , Temporary Assistance for Needy Families (TANF), Medicaid, the State Child Health Insurance Program (SCHIP), housing assistance or other programs; or
- **Supplemental Security Income annual benefits notification** issued to the person enrolling the student within the past twelve (12) months and indicating his/her current DC home address; or
- **A tax information authorization waiver form**, certified by the DC Office of Tax and Revenue, with the name of the person enrolling the student and evidence of payment of DC taxes for tax year 2010; or
- **Military housing orders and residency verification letter or DEERS statement** showing the student's name, the name of the person enrolling the student, and their current DC home address; or
- **Proof that the child is a ward of the District of Columbia**, in the form of a court order; or
- **Embassy letter**, with an issue date after April 1, 2011, showing the name of the person enrolling the student, a statement indicating that the person enrolling the student and the student live on embassy property in the District of Columbia, and an official embassy seal.

**(B) Or, if the items listed above are not applicable, two (2) of the items listed below will suffice as proof of residency in DC. The address and name on each of the below items must be the same.**

- Unexpired **DC motor vehicle registration** showing the name of the person enrolling the student and his/her current DC home address;
- An unexpired **lease or rental agreement with receipts for payment or canceled checks for payment of rent** for a period within two (2) months immediately preceding consideration of residency, for the current DC address at which the student actually resides;
- An unexpired **DC motor vehicle operator's permit** or official government issued non-driver identification in the name of the person enrolling the student showing his/her current DC home address; or
- One **utility bill (only gas, electric, and water bills are acceptable) with the name of the person enrolling the student, current DC home address, and with receipt of payment or cancelled check for payment of the bill.** The receipt of payment or canceled check must be from a period within the two (2) months immediately preceding consideration of residency.

**Other primary caregivers:**

- If the person enrolling the student is another primary caregiver, he/she has provided proof of caregiver status in accordance with the Residency Verification Rules. Other primary caregivers must also establish DC residency, as outlined above.

FORM BB-3

**Benjamin Banneker Academic High School**

**Student Assessment/Recommendation**

**ENGLISH**

Name of Applicant \_\_\_\_\_  
(Please Print)                      Last                                      First                                      Middle

Name of Teacher \_\_\_\_\_

In addition to other personal and scholastic qualities, the applicant's reading ability and his/her level of written and verbal competence will be strongly considered.

1. What is the best estimate you can give to the applicant's present rank in your course?

Top 10% ☐      2<sup>nd</sup> 10% ☐      3<sup>rd</sup> 10 ☐      4<sup>th</sup> 10% ☐      5<sup>th</sup> 10% ☐

2. What is the applicant's attitude toward and interest in the course work?

Outstanding ☐    Excellent ☐    Good ☐    Average ☐    Below Average ☐

3. What are the levels of promptness and attention to detail with which the applicant completes class assignments?

Outstanding ☐    Excellent ☐    Good ☐    Average ☐    Below Average ☐

4. What is the applicant's level of written expression?

Outstanding ☐    Excellent ☐    Good ☐    Average ☐    Below Average ☐

5. What is the applicant's level of verbal expression?

Outstanding ☐    Excellent ☐    Good ☐    Average ☐    Below Average ☐

6. How would you evaluate the applicant's present reading ability in relation to his or her age and grade level?

Outstanding ☐    Excellent ☐    Good ☐    Average ☐    Below Average ☐

7. Does the applicant appear to be interested in outside, non-assigned reading?

Outstanding ☐    Excellent ☐    Good ☐    Average ☐    Below Average ☐

8. Do you feel the applicant will be successful in advanced work?

Outstanding ☐    Excellent ☐    Good ☐    Average ☐    Below Average ☐



FORM BB-3

9. Teacher's Recommendation: Please discuss the applicant's attitude toward school in terms of (a) **strengths and weaknesses**, (b) **achievements**, (c) **motivation and capacity for hard work**.

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**My signature verifies that I am currently teaching this applicant.**

\_\_\_\_\_ Date \_\_\_\_\_ Teacher's Signature \_\_\_\_\_  
School \_\_\_\_\_

Return Completed Form to Counselor

FORM BB-4

**Benjamin Banneker Academic High School**

**Student Assessment/Recommendation**

**MATHEMATICS**

Name of Applicant \_\_\_\_\_  
(Please Print)                      Last                                      First                                      Middle

Name of Teacher \_\_\_\_\_

In addition to other personal and scholastic qualities, the applicant's mathematical reasoning ability and his/her level of competence in computation skills will be strongly considered.

1. What is the best estimate you can give to the applicant's present rank in your course?

Top 10%   ☐      2<sup>nd</sup> 10%   ☐      3<sup>rd</sup> 10   ☐      4<sup>th</sup> 10%   ☐      5<sup>th</sup> 10%   ☐

2. What is the applicant's attitude toward and interest in the course work?

Outstanding   ☐    Excellent   ☐    Good   ☐      Average   ☐    Below Average   ☐

3. What are the levels of promptness and attention to detail with which the applicant completes class assignments?

Outstanding   ☐    Excellent   ☐    Good   ☐      Average   ☐    Below Average   ☐

4. What is the applicant's level of abstract reasoning?

Outstanding   ☐    Excellent   ☐    Good   ☐      Average   ☐    Below Average   ☐

5. What is the applicant's level of computation skill?

Outstanding   ☐    Excellent   ☐    Good   ☐      Average   ☐    Below Average   ☐

6. How do you rate the applicant's problem-solving skills?

Outstanding   ☐    Excellent   ☐    Good   ☐      Average   ☐    Below Average   ☐

7. How would you evaluate the applicant's present mathematical ability in relation to his or her age and grade level?

Outstanding   ☐    Excellent   ☐    Good   ☐      Average   ☐    Below Average   ☐

FORM BB-4

8. Teacher's Recommendation: Please discuss the applicant's attitude toward school in terms of (a) **strengths and weaknesses**, (b) **achievements**, (c) **motivation and capacity for hard work**.

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**My signature verifies that I am currently teaching this applicant.**

_____	Teacher's Signature_____
Date	Subject_____
	School_____

Return Completed Form to Counselor

FORM BB-5

**Benjamin Banneker Academic High School**

**TEACHER RECOMMENDATION**

Name of Applicant \_\_\_\_\_  
(Please Print)                      Last                                      First                                      Middle

Name of Teacher \_\_\_\_\_

A teacher, other than the Mathematics or English teacher, who knows the applicant well and has had him/her in a class within the past year, should complete this form. Please discuss the applicant's attitude toward school in terms of: (a) **strengths and weaknesses**, (b) **achievements**, and (c) **motivation and capacity for hard work**.

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**My signature verifies that I am currently teaching this applicant.**

\_\_\_\_\_  
Date

Teacher's Signature \_\_\_\_\_

Return Completed Form to Counselor

FORM BB-6

**Benjamin Banneker Academic High School**

**THE COUNSELOR'S ASSESSMENT AND RECOMMENDATION**

Name of Applicant \_\_\_\_\_  
Last First Middle

\_\_\_\_\_  
DCPS Student Number Counselor's Name

**Counselor's Recommendation:** Please discuss the applicant's school adjustment and accomplishments both socially and academically. Include any information you may have regarding the student's long range educational and career plans.

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**Please verify:**

**To your knowledge has this student ever been suspended? Yes \_\_\_\_ No \_\_\_\_ if yes, please complete:** \_\_\_\_\_

**Date Reason**

**Please attach:**

- a copy of the latest standardized test results – one sheet showing percentile rankings and the second sheet showing performance standards.
- a copy of the current second advisory report card along with a copy of last year's final report card.

Date \_\_\_\_\_ Counselor's Signature \_\_\_\_\_

**Benjamin Banneker Academic High School**

**COMMUNITY SERVICE/CIVIC RECOMMENDATION**

Name of Applicant \_\_\_\_\_  
(Please Print)                      Last                                      First                                      Middle

A citizen or community leader who knows the applicant well and can indicate community service or civic contributions made by the applicant should complete this form.

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\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Organization

Return Completed Form to Counselor

FORM BB-8

**Benjamin Banneker Academic High School**

**RANK VERIFICATION FORM**

NOTE: According to Board of Education Rules, a student may not be considered for admission unless the **school principal** completes this form in its entirety.

Student's Name \_\_\_\_\_

**This student ranks in the top 18% of his/her grade level.** Yes [ ] No [ ]

**Please evaluate the candidate in the following areas by placing a check in the appropriate column:**

	Truly Outstanding	Excellent	Good	Average	Below Average	No Basis for Judgment
Honesty/Integrity	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]
Self-esteem	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]
Self-discipline	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]
Peer compatibility	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]
Sensitivity to others' feelings/ respect for individual differences	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]
Warmth of personality	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]
Emotional stability	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]
Reaction to setbacks	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]
Respect for authority	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]
Maturity (relative to age)	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]

**OVERALL EVALUATION**

As a person	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]
As a student	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]

If you consider the candidate remarkably strong or weak in any of the above areas, please elaborate.

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If the candidate is not, or has not been, in good standing in your school, please explain.

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\_\_\_\_\_  
Signature of Principal

\_\_\_\_\_  
Date

Return Completed Form to Counselor

FORM BB-9

**Tenth Grade Applicants Only**

**COURSE VERIFICATION**

A student who is currently enrolled in the ninth grade must provide an entire 2010-2011 schedule of courses

	Semester I Course Title	Course #	Semester II Course Title	Course #
<b>*Mathematics</b>	_____		_____	
<b>English</b>	_____		_____	
<b>Science</b>	_____		_____	
<b>Social Studies</b>	_____		_____	
<b>*World Language</b>	_____		_____	
<b>Technology</b>	_____		_____	
<b>Health/P.E</b>	_____		_____	
<b>Music</b>	_____		_____	
<b>Art</b>	_____		_____	
<b>Other</b>	_____		_____	

**\*Applicant must be assessed for proficiency.**

\_\_\_\_\_  
**Signature of Principal**

\_\_\_\_\_  
**Date**

Return Completed Form to Counselor